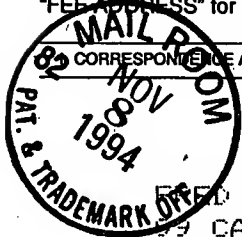


PART B—ISSUE FEE TRANSMITTAL

MAIL INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below, or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of issue fee or thereafter. See reverse for Certificate of Mailing.



1. CORRESPONDENCE ADDRESS ERED PHILPITT 99 CANAL CENTER PLAZA SUITE 300 ALEXANDRIA, VA 22314		2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change) INVENTOR'S NAME Street Address City, State and ZIP Code CO-INVENTOR'S NAME Street Address City, State and ZIP Code <input type="checkbox"/> Check if additional changes are on reverse side	
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SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
07/934,678	09/10/92	008	VARGOT, M 1307	08/08/94
First Named Applicant WOOD, ERIC				

TITLE OF LINING OF PIPELINES OR PASSAGEWAYS INVENTION

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
1 2502-006	264-516.000	00 D38	UTILITY	NO	11170.00	11/08/94

\$ 1210.00

3. Correspondence address change (Complete only if there is a change) LOWE, PRICE, LeBLANC & BECKER SUITE 300 99 CANAL CENTER PLAZA ALEXANDRIA, VA 22314 P 30126 11/17/94 07934678	4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed. 1 LOWE, PRICE 2 LeBLANC & BECKER 3
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5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type) (1) NAME OF ASSIGNEE: INSITUFORM (NETHERLANDS) BV (2) ADDRESS: (CITY & STATE OR COUNTRY) ROTTERDAM, THE NETHERLANDS	6a. The following fees are enclosed: <input type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies 6b. The following fees should be charged to: DEPOSIT ACCOUNT NUMBER 12-2237 (ENCLOSE PART C) <input checked="" type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies <input checked="" type="checkbox"/> Any Deficiencies in Enclosed Fees
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A. ☐ This application is NOT assigned.
☐ Assignment previously submitted to the Patent and Trademark Office.
XXX Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the issue fee to the application identified above.

(Authorized Signature) Alan Lowe (Date) 11/3/94

NOTE: The issue fee will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE

PART B—ISSUE FEE TRANSMITTAL

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1. CORRESPONDENCE ADDRESS	2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)
<p>182 1994</p> <p>PHILPITT</p> <p>99 CANAL CENTER PLAZA</p> <p>SUITE 300</p> <p>ALEXANDRIA, VA 22314</p>	INVENTOR'S NAME
	Street Address
	City, State and ZIP Code
	CO-INVENTOR'S NAME
	Street Address
	City, State and ZIP Code
	<input type="checkbox"/> Check if additional changes are on reverse side

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
07/934,678	09/10/92	008	VARGOT, M	1307 08/08/94
First Named Applicant	WOOD, ERIC			

TITLE OF INVENTION: LINING OF PIPELINES OR PASSAGEWAYS

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
1 2502-006	264-516.000	D38	UTILITY	NO	\$1178.00	11/08/94

\$ 1210.00

3. Correspondence address change (Complete only if there is a change)	4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.
<p>LOWE, PRICE, LeBLANC & BECKER</p> <p>SUITE 300</p> <p>99 CANAL CENTER PLAZA</p> <p>ALEXANDRIA, VA 22314</p>	<p>1. LOWE, PRICE</p> <p>2. LeBLANC & BECKER</p> <p>3.</p>

P 30125 11/17/94 07934678

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12-2237 030 142 1,210.00CH

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:	INSITUFORM (NETHERLANDS) BV
(2) ADDRESS: (CITY & STATE OR COUNTRY)	ROTTERDAM, THE NETHERLANDS

- A. ☐ This application is NOT assigned.
☐ Assignment previously submitted to the Patent and Trademark Office.
 XXX Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

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(ENCLOSE PART C)
<input checked="" type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies
<input checked="" type="checkbox"/> Any Deficiencies in Enclosed Fees

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature) Frank P. Presta (Date) 11/8/94
 FRANK P. PRESTA, REG. 19,828
 NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.